

**GEORGIA STATE BOARD OF VETERINARY MEDICINE**  
**Continuing Education Program Application & Approval Form**

All C.E. program providers must comply with Board Rule 700-7-.03, which can be viewed on our website at <http://sos.ga.gov/index.php/licensing/plb/53>. All C.E. providers seeking approval of a C.E. Program by the Georgia State Board of Veterinary Medicine must submit an Approval Form for each program presented. These forms should be submitted 60 days in advance. To assure attendance, the Board requests that certificates be distributed at the conclusion of the program.

**PLEASE TYPE OR PRINT**

**Sponsoring Group:** \_\_\_\_\_

**Program Title:** \_\_\_\_\_

**Date(s) of Program:** \_\_\_\_/\_\_\_\_/\_\_\_\_ \_\_\_\_/\_\_\_\_/\_\_\_\_ \_\_\_\_/\_\_\_\_/\_\_\_\_

**Time of Program:** \_\_\_\_\_

**Program Site:** \_\_\_\_\_

**Intended Audience:** \_\_\_\_\_

**Goals/Behavioral Objectives:** \_\_\_\_\_

**Method of Instruction:** \_\_\_\_\_

**Program Materials:**

1. Attach Program Outline or Agenda and/or promotional material
2. Attach short vitae for each speaker
3. Evaluation Method-attach a copy of instrument used to evaluate the program

**\*Program Materials must provide the title, date(s), and time frame for the hours of the program**

**CE Hours Requested:** \_\_\_\_\_ **LEAP credit requested** \_\_\_\_ **YES** \_\_\_\_ **NO**

**Contact Person Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone Number:** (    ) \_\_\_\_\_ - \_\_\_\_\_ **Email** \_\_\_\_\_

**TO BE COMPLETED BY**  
**THE GEORGIA STATE BOARD OF VETERINARY MEDICINE:**

**Date Received:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Program #:** \_\_\_\_\_

**Approved**\_\_\_\_ **Disapproved**\_\_\_\_ **Date Approved:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**CE Hours Approved:** \_\_\_\_\_ **LEAP Credit Approved:** \_\_\_\_\_

**Approved by:** \_\_\_\_\_ **Comments:** \_\_\_\_\_

**\*Please fax or mail completed documents to Attn:**

**Phone:**  
**(478) 207-2440**

**Georgia State Board of Veterinary Medicine**  
**237 Coliseum Drive**  
**Macon, GA 31217**

**Fax:**  
**1-866-888-1308**